

# FMS Foundation Newsletter

3401 Market Street suite 130, Philadelphia, PA 19104, (215-387-1865) Vol 3 No. 1

January 17, 1994

Dear Friends,

Thank you. When we returned from a two week holiday break, we were greeted with a most amazing basket of notes and letters of appreciation. We were deeply moved. It took us three days just to open and read them all. We hope that when this madness subsides, we will be able to answer individually and to let you know how much your letters meant. For now, thank you.

We start the new year with almost 10,000 families. Imagine, 10,000 families who have contacted the foundation to say that they are worried about someone in their family who entered therapy and who then claimed to have recovered repressed memories of abuse taking place 10, 20, 30, even 40 years ago. These alleged memories of abuse took place repeatedly for decades and often include bizarre rituals and murders - none of this known to the person before therapy. The families are distraught because the person they love has cut off contact with everyone who will not validate the memories. No discussion. No reason. A refusal to consider alternative explanations. Families say the person they love has taken a new personality and a new identity as a "survivor." If any other medical practice had 10,000 complaints it would be taken off the market. There are no mechanisms for taking "recovered memory therapy" off the market.

Critics of the False Memory Syndrome Foundation such as Judith Herman, M.D. have said that this is a political matter. We suggest that if that is the case, we are dealing with a witch hunt. A "witch hunt" according to the American Heritage Dictionary is "a political campaign launched on the pretext of investigating activities subversive to the state." While child abuse is surely a terrible problem and an unconscionable crime that must be punished, the 10,000 reports that we have received don't really seem to be about child abuse. Child abuse is a criminal offense. It is a serious matter. It is a matter for the criminal justice system. Child sexual abuse should not be trivialized.

Except for the one out of sixteen reports that results in legal action, and most of those wither at deposition, the reports we receive indicate there is not even a pretext of investigation. The patient is diagnosed as a "survivor" because he or she has "all the symptoms of abuse." The therapists argue that it is not their job to investigate. In the vast majority of cases, therapists do not even report their conclusions about child sexual abuse to authorities. On the one hand, they claim that the damage done is so great that the patient will need years and years of therapy. They claim that the danger is so great that the patient must sever all connection with the family. On the other hand, all the appropriate government institutions that were established to deal with such horrible crimes against children are simply ignored. Such inconsistencies seem to support Dr. Herman's claim that we are dealing with a political matter.

Perhaps the most disturbing aspect of the current phenomenon, is the misuse of science to promote a political end. It is the scientific issues that are the focus of the False

Memory Syndrome Foundation. Patients have been told that certain things were "scientific" when in fact they were not. Patients have been led to believe that "flashbacks" represent historical reality when the research indicates that "flashbacks" are worst-case scenarios. Patients have been led to believe that "repressed memories" are somehow more pristine than other memories when in fact there is no evidence for that. Patients have been led to believe that techniques such as hypnosis or sodium amytal or dream interpretation could be used to determine historical accuracy when in fact memories recovered with such techniques are like other memories: some true, some a mixture of fact and fantasy, some false. Patients have been led to believe that all sexual abuse leads to long term negative consequences when in fact the consequences vary with the severity and context of the crime. Patients have been led to believe that huge proportions of the population have been sexually abused when in fact the definition of sexual abuse is no longer clear and our society is shamefully ignorant of this data.

The foundation has been in existence for almost two years. In all that time, there has been no serious challenge to the information about memory that we have provided. Memory researchers are in agreement on most issues. Memory is not like a videotape recorder that can be replayed. Memories of events are reconstructed from fragments. In that reconstruction, events are reinterpreted to make sense in the here and now. Some memories are surely true, but some are just as surely a mixture of fact and fantasy or even false.

Rather than address the work of the foundation at the level of issues, critics have only made attacks on persons. At first the attacks were of the sort that the foundation was a front for satanic ritual cult activity, was harboring perpetrators and was funded by the mafia. Now the attacks are primarily directed at the Foundation leadership as a way to try to undermine the credibility of FMSF. A recent article about the family of the Executive Director in *Philadelphia* magazine, for example, prominently displayed on its front cover, "The most dysfunctional family in America." A little bias perhaps! A columnist for the *Boston Globe* named Randall Ryan wrote two hostile columns in December. Without examining the records or speaking to anyone at the foundation he stated that the foundation "was dishonest from its inception and is tainted in its leadership." On January 1, Mr. Ryan wrote that he had "been assigned to another job at the Globe."

The above negative examples are the exception. Most of the media coverage about FMS shows an increasing understanding of the issues. Most of the people we speak to in the media understand something that too many professionals don't yet understand: there are not two sides to this issue for most people. The fact that people are abused and may or may not remember is surely not an issue. The fact that some people who may have forgotten (repressed?) abuse recall it in therapy is surely not an issue. The fact that people can misremember is surely not an issue. What is at issue is the way that human beings are treated. By its silence, the therapy community seems to be saying that it is acceptable to accuse someone of criminal activity solely on the basis of a memory recovered in

therapy by a distressed patient, that radical action can be taken on the basis of a recovered memory without any sort of investigation even in a situation in which there is no real danger to anyone because we are dealing with independent adults, that it is acceptable to accuse a person without providing any opportunity for the accused person to defend himself or herself. Most people feel that such attitudes are arrogant, dangerous and cruel. One concerned professional told us that what is taking place is psychological elder abuse.

*"Do no harm."* Is that still part of the oath taken by medical professionals? That code is totally meaningless if people who are affected by the diagnosis and treatment plan are systematically excluded from consideration. If there is any issue, this is it.

Most of the professionals with whom we have contact are caring, hardworking and ethical people who are worried about the excesses that are rapidly undermining the credibility of the mental health profession. Other professionals are still having a hard time believing that this is really going on. When they come to understand the situation and realize the harm brought by zealotry of a few, they are distraught. Last week, a professional came to the office to volunteer for a week. She is a person who has spent her career working with offenders and victims. She wanted to learn about the foundation first hand because in the professional meetings in her state all she was getting was "negative propaganda." One day she helped us open the mail. Tears rolled down her cheeks as she read the reports of families contacting the foundation to ask for information. "I had no idea," she said.

Families need to help professionals understand what is going on. This year the efforts of the foundation will be to work as closely as possible with the professional organizations. Invite the leadership of the professional organizations in your state to come to meetings of families. If they can't come to your meetings, go and visit them. We need to arrange face to face meetings in which people listen respectfully to each other.

10,000 families! When will this end? We must have families and professionals working together to find ways to help families reunite. We can't afford to get bogged down in issues of blame. There isn't time for the people in their 70's and 80's. It isn't necessary. People make mistakes. Parents make mistakes, children make mistakes, professionals make mistakes. Disasters happen. Bad things happen. We need to pick up the pieces and get

on with it. Indeed, as sad as all this is, it is funny too. Imagine a whole culture getting caught up with the belief that the proof that something happened is that we forgot it!

10,000 families. The office has been busy. There were 900 phone calls in the twenty-four hours following the Sally Jessy Raphael program in December. That program featured a mother and daughter reuniting. In her final soliloqui, Sally raised serious questions about the uncritical acceptance of accusations in the past decade. A few days later mention of the foundation was made in an Ann Landers column. There were another 900 calls and the letters from that column are still arriving. Across the country there have been columns and articles. The fact that so many of you are willing to speak out is making a tremendous difference. Almost every retractor mentions media coverage as a factor in reconsidering. The Foundation has been accused of trying to discredit survivors. That is simply false. People who have been abused deserve our compassion and our concern. All people, including survivors, deserve the respect of being given accurate information.

Pamela

### Comments on Linda Meyer Williams study by Richard A. Gardner, M.D.

In recent weeks an as yet unpublished article by Dr. Linda Meyer Williams of the University of New Hampshire has been given significant publicity in the media. One hundred and twenty-nine women with hospital-chart documentation of their childhood sexual abuses 17 years earlier were interviewed. Thirty-eight percent of the women had no recollection at all of the childhood abuses to which they had been subjected. The women ranged in age from 10 months to 12 years at the time of the original hospital recording of their abuses and 18-31 years of age at the time of the follow-up study of their recall.

I consider the study to be an excellent one and I consider the results to be valid. I have no significant criticisms of the format of the study itself. I am, however, critical of the authors who consider this study to provide refutation to those like FMSF (mentioned specifically by name) who "have suggested that the recovered memories are fabricated by disturbed or vindictive adults or fostered by overzealous therapists." The implication here is that FMSF's position is that all such memories recovered under therapy must be fabricated. It is

Among psychiatrists, a long, growling dispute -- about twenty years in duration -- has been fought and is now ending between romanticists and the empiricists, who insist that all the practices of psychiatry be based upon observation and methodical study of patients. This dispute is ostensibly about psychotherapy but actually is about the proper direction psychiatry itself ought to take. At stake is who will command the future of psychiatry and, more important, how patients will come to be treated.

The empiricists are winning because their approach has expanded, in a clear and gratifying way, our knowledge of mental disorders. The romantics, in my view, are losing not because they fail to provide helpful proposals for psychotherapy. This is their strength. They are losing because, as romantics will, they have become infatuated by their own thought. They claim to know things they never try to prove. They are charmed by novelty and ignore, even disdain, drab facts. More recently, in their thinking they have taken a nightmarish turn toward chaos that has caused patients and their families much suffering.

Paul McHugh, "Psychotherapy Awry," *American Scholar*, Winter 1994.

very risky making any statements about what a whole Foundation's position is on a subject of such great controversy. Although I do not speak for FMSF, I do know that my position on this is. It is this:

I do not doubt that many people actually forget many things, including traumas. Whether one wants to label this inability to recall old events (whether traumas or otherwise) repression or forgetting is not too important. Such a phenomenon does not preclude, however, the coexistence of another phenomenon, namely, people who never had a particular experience being made to believe that they did. The two phenomena need not preclude one another. In elaboration, mention must be made of the process of accretion. Normally, we forget a vast majority of all things that happen to us. If we were to continually keep in memory -- especially conscious awareness -- all the things that have ever occurred to us, we would be driven insane. There must be a process by which thoughts are removed from conscious awareness and stored somewhere in our brain. And it is reasonable to assume that these become available for retrieval with varying degrees of difficulty. All of us may exhibit the phenomenon of progressive elaboration of a memory after initial recall. More specifically, a long-forgotten event may be brought into memory by some external evoking stimulus (such as a friend or relative reminding us of the experience). Initially, we may recall only a small fragment of the event. However, with further discussion and "mental searching," we may be able to retrieve from our memory bank progressively more material about the event. This process is called memory accretion and is to be found in everyone.

When preparing this statement, I did a little experiment on myself in order to demonstrate how this process might work for me. I reached over to my bookshelf on which I have stored some old books dating back as far as my early teens. I opened the graduation yearbook from Public School #82 in the Bronx (in New York City) from which I graduated in 1945 (at the age of 14). I have not picked up that book in at least 10 to 15 years and probably have only looked at it two or three times since graduation. It sits there as an old yellowed, fragile memento of what is simultaneously a million years ago and, at the same time, only yesterday. I decided in advance to make a list of things that I could honestly say I never would have thought about again had I not opened the book but which, upon perusing the book, might result in their springing into clear memory.

This is what resulted: I saw the names of two English teachers who I am certain I never would have thought about through the remainder of my life. Yet, seeing their names in the book immediately brought forth very specific memories of my experiences with them. I noted my name on a list of contributors to a science fair at a nearby high school, the Bronx High School of Science. Prior to seeing the notation, I had absolutely no memory of that event and, if someone had asked me about it, I would have denied that there was such an event. The title of the presentation was "Physiology of the Frog." Seeing my name next to that title immediately brought forth memories of experiments that I used to conduct with frogs' legs and their reflexes. I am certain that I never would have thought about that science fair again

had I not read about it in my old yearbook. Opening the book also resulted in my thinking about Fritz, "my bully," a bigger boy who victimized me and other more studious types. Thoughts of the humiliations I was subjected to at his hands brought about a transient reliving of some of those old insults. I could go on, but I think the reader gets my point. I believe any of the readers would have a similar experience.

Does it really matter what label we give to the phenomenon by which I remembered once again my two English teachers, my science fair experience, and Fritz? Does it really matter whether one labels this phenomenon recall of forgotten memories or recall of repressed memories? I could easily envision a therapeutic experience in which the same memories might be brought to conscious awareness and focus. I can easily envision a therapist saying to me, "Did anyone ever bully you in junior high school?" And I can readily imagine the question immediately evoking a recollection of Fritz, "that son-of-a-bitch." Accordingly, the Williams study is not surprising. There are people who were abused, who have forgotten that they were, and who will recall their abuses in the context of therapy -- especially a therapy focusing on past sexual abuses. This fact does not, however, preclude the existence of another phenomenon, namely, overzealous therapists inducing their suggestible patients into believing that abuses occurred that never took place. One can "believe in" the phenomenon of repression (or forgetting, or whatever else one wants to call it) and still also "believe in" the phenomenon of false sex-abuse accusations. One does not have to take a choice. Those who consider the Williams study to demonstrate that FMSF denies entirely the phenomenon of repressed memories are oversimplifying the situation and are certainly not speaking for one person who has no problem recognizing both the phenomenon of false accusations of sexual abuse and the phenomenon of false accusations of sexual abuse allegedly derived from repressed memories.

### Therapist or Validator?

While working on an article, Richard Bernstein visited a counselor at University of New Hampshire's Sexual Harassment and Rape Prevention Program and asked her about the numbers of women who had come to her organization for help. "We had 130 sexual assault survivors and significant others," the counselor told him. Among them were seventy-three 'sexual assault survivors' and thirty-five 'child abuse and incest survivors.' Bernstein asked if the women given the 'survivor' designation were found to have actually been victimized or if they just said they had been victimized.

"If a person thinks she's been victimized," LeGault said, "we're here to validate that experience." Richard Bernstein, "Guilty if Charged" *The New York Review*, January 13, 1994

### More on MPD

The number of questions we receive about Multiple Personality is increasing. Clearly, this is a topic of concern to many people. When there is such disagreement within

the profession about MPD, it is time to look at it from another perspective. A book we have found helpful in this respect is *"The Passion of Ansel Bourne: Multiple Personality in American Culture"* by Michael Kenny, Smithsonian, 1986. An anthropologist, Kenny argues that "multiple personality is a culturally specific metaphor, not a universally distributed mental disorder. Like possession it is a way of representing distress embedded in the circumstances of time, place, and culture; like possession it is reinforced by the willingness of others to accept its reality... the disorder has discernible cultural origins both as a medical concept and as a mode of behavior. However, those who deploy the concept -- and on the other side those who accept specialist word as to its validity -- have little sense of its culturally unique qualities not of its history within Western psychological thought." (p 3)

### Learned MPD

We received an article from a woman named Lauri about her personal experience as an MPD patient. She referred to her encounter with Learned Multiple Personality Disorder, which we thought an interesting term. Her story is much too long for us to print in its entirety here. We thought that a section entitled, "Learning to be a good patient" was insightful.

I was not the only MPD patient. My therapist had a group of five women participating in this dysfunctional, cult-like treatment. Our therapist was using mind games to control us and convince us he was the only person who could help us. In "private", he would drop comments about the other MPD "girls." As patients, we became very competitive and jealous of each other.

I was especially jealous of one woman who was very pretty. He had made sexual advances toward one of her sexiest alters, and I was convinced he was infatuated with her. He would play his guitar and sing for her, but never me. He compared the two of us and said we were very much alike. He often confused our names which made me feel hurt. I wanted him to like me in the way he liked her.

I clearly understood the sickest patient received the most attention. So, I devised behavior that would get his attention: act like a five-year-old, come intoxicated to my session, threaten him with a knife, or even attempt suicide. Everyone of us in the support group were in some way in love with our psychologist.

I wanted to be the best. I became a model MPD patient and exhibited all the right traits. I learned MPD and let it in, but soon it took control of my mind and body.

The doctor decided I needed five to seven years of therapy. He explained to me and my husband, "Because Lauri now has MPD behavior, it follows that she had MPD. Thus, some terrible abuse in her childhood must have caused it. So terrible that she's repressed those memories deep in her mind. With my help, the alters will reveal the abuse, then she'll remember her own experiences. Finally, she will work through those old feelings and get better."

This is about the time he raised his rates to \$120 per hour.

We bought it, and I worked hard to recall repressed memories. Of course, there were no real memories, but the mind is an amazing thing. Let me explain, in lay terms, how repressed memories were created on one occasion. The therapist called-up Beth, a 5-year old alter, and hypnotized her. He suggested sexual abuse had occurred at the hands of her Daddy. He explained she needed to see a "big movie screen" in her mind and tell him what she saw. Then, he asked leading questions about touching, etc. Beth performed just as the therapist predicted she would. Beth and I were rewarded with much attention and sympathy.

In reality, I didn't have those memories, but the doctor considered them true and wanted more. For months, I allowed other alters to write anything they could remember. The memories grew worse and worse and I became horrified. I thought it was all true, and I felt worthless and betrayed.

I recalled various fragments of movies, books, talk shows, and nightly news, and soon I had plenty of child abuse memories. But, it didn't stop there. Eventually, I said I had taken part in Satanic Rituals, been buried alive, drank blood, and helped to kill a baby. With every new memory, my therapist was intrigued and building a case to prove he was right about me all along. I was rewarded with his attention to me and was his "best" patient. But, I started to have feelings of death and became suicidal.

I truly exhibited all the MPD symptoms even though I had learned them. Control of my mind, emotions, and will was given to the personalities the therapist had empowered.

### Training of Therapists

"What kind of training in memory do therapists get?" Different professions approach the education of future therapists in different ways and each university has virtual autonomy in designing its own curriculum. One study of Master of Social Work programs suggests how little formal training in memory is given to MSW students.

A paper by Allen Feld to be presented at the Annual Program Meeting of the Council on Social Work Education, March 1994, reports that there is very little content on memory, memory retrieval or recall and repression. Feld conducted a national survey and approximately half (48) of the accredited programs responded. Only 22 schools reported content on memory with approximately two-thirds of those programs offering three or less hours. Sixteen programs reported content on memory retrieval with almost half of these programs stating they offer one hour. While repression is more widely included in MSW curriculum, the 34 programs again spend very little time on this content with almost two-thirds offering three or less hours in programs which typically would take two years to complete. Feld also notes that social work educators have little formal academic preparation to teach these subjects and that students are required to read little material in these areas. When required, they are directed to non-scientific material more frequently than scientific material.

## From our Readers

### Thank You, Trent

With the exception of his son Lewis, immediate family members had abandoned him. It took his death December 10, 1993, for them to even try recalling the good man and the good times.

By then, genuine memories had long been replaced by false memories. There was no reconciliation, only revenge; no forgiveness, only fabrication. Such is the legacy of False Memory Syndrome.

The obituary said that Trent Joe Parker had died of complications due to pneumonia. Those of us who recall the hell Trent suffered for nearly three years -- and the effect that suffering had on his ulcer -- know better. Trent was exhausted, both physically and spiritually.

Still, he worked tirelessly until the end. Anyone associated very long with the False Memory Syndrome Foundation knows the countless hours Trent spent gathering and disseminating information on FMS, recording television and radio programs, answering questions and making phone calls. He was always willing to listen and to speak out. He called me often to make sure I knew the latest information on FMS or to make sure I had a copy of the most recent FMS article.

I still remember our initial conversation in March 1992. As a result of that conversation and several interviews that followed, Trent became "John" in the first of a two-part newspaper story on FMS called "False Memory Syndrome Taking its Toll on Families." He was proud to have played a part in exposing the quackery behind "recovered memories," and he was hopeful his story would spare others the anguish he was experiencing.

I remember how he missed the love and affection of his grandchildren. Trent's children, with the exception of one son, cut off all contact shortly after one daughter and two granddaughters entered therapy and began casting allegations -- first at a baby sitter, then at a coach, then at Trent. He was angered by his children's gullibility, but he never stopped loving them.

I remember how disgusted Trent was with the psychotherapists who had charged his children and grandchildren \$100 an hour to destroy his family. "When is this all going to end?" he used to ask me after hearing a new allegation against him, or after receiving another phone call from a grieving parent or grandparent.

Trent's wife divorced him last fall after following her children's lead into therapy. The divorce, and the credibility his wife placed in the allegations against him, crippled

Trent's spirit. He phoned me the day his divorce was final, calling it the worst day of his life. "She was the only woman I ever loved," he said. When I asked him how he was doing, he replied, "Not good." Trent kept fighting, but he never recovered from the divorce.

The last time we talked was two days before he died. Trent called to make sure I knew about the article in the January Reader's Digest titled "Justice Gone Crazy."

Had I known the conversation would be our last, I would have kept him on the phone longer. I would have thanked him for his courage in being interviewed for that first newspaper story. I would have told him that he had earned the love and respect of innumerable people. I would have expressed gratitude for his tireless efforts. I would have reminded him of the many people he had consoled and helped. I would have told him how much he would be missed. And I would have said thank you.

"We've lost our general," Helen Barr said when she called to tell me Trent's battle had ended. The funeral was December 14. Sometimes I still forget, and I wonder why Trent doesn't call anymore.

We are poorer for his passing, but we are richer for having known him. He showed us how to fight injustice. We must carry on the fight. He would want that.

We salute you, Trent -- our general.

Michael Morris  
Spanish Fork, Utah

### WHERE DO 6,007 FAMILIES LIVE ? JAN 17, '94

not including

#### 3,850 POTENTIAL FAMILIES AND 117 RETRACTORS

AK (11)	AL (20)	AR (20)	AZ (178)	CA (928)
CO (110)	CT (58)	DE (20)	FL (264)	GA (64)
HI (10)	IA (48)	ID (32)	IL (247)	IN (72)
KS (53)	KY (24)	LA (25)	MA (143)	MD (98)
ME (31)	MI (192)	MN (163)	MO (108)	MS (8)
MT (33)	NC (77)	ND (7)	NE (32)	NH (26)
NJ (139)	NM (42)	NV (24)	NY (270)	OH (224)
OK (57)	OR (143)	PA (302)	RI (18)	SC (28)
SD (14)	TN (46)	TX (233)	UT (172)	VA (94)
VT (24)	WA (259)	WI (170)	WV (13)	WY (12)
DC (8)	VI (3)	PR (1)	Canada :	AB (19)
BC (66)	MB (42)	NB (9)	NF (1)	NS (11)
ON (169)	PE (2)	PQ (10)	SK (7)	Australia (11)
UK (250)	France (2)	Germany (2)	Ireland (2)	Israel (2)
Netherlands (1)	NZ (1)	S. Africa (1)	Scotland (1)	

the recent improvements and progress made in their respective countries.

Reported the Italian minister, "In the field of medical science our doctors have accomplished truly marvelous things. One team of orthopedic surgeons, for example, amputated the legs of ten patients, attached to each patient a set of newly invented artificial legs, and within a few weeks all ten patients could walk, run, and jump just as well as they had done with their natural legs."

"In our land," the Japanese minister chimed in, "we have always had a keen interest in developing better and better optic lenses. Indeed, a team of our ophthalmologists surgically removed the eyes of 24 persons, implanted a set of artificial eyes equipped with newly developed lenses, and all of these 24 patients can see better now than they could see with their natural eyes."

Living in Germany when I was eleven years old, I heard the following story told in whisper tones not long before World War 2 began in 1939.

The ministers of interior affairs of Germany, Italy, and Japan were discussing



The German minister could hardly wait to speak. Said he, "You report what astonishing progress has been made in your countries through the efforts of experts in technology and medicine. In our land a simple painter of Austrian origin removed the brains of about 90 million people. He did so with mere words -- and to this day most of my fellow citizens have not even noticed that something has been done to them."

Until July 3, 1993, when I first learned about the False Memory Syndrome Foundation, I repeatedly thought of this story and wondered whether something similar "has been done with mere words" to a vast number of our fellow citizens during the recent years.

Misleading propaganda about unsubstantiated sexual abuse and incest has proliferated. When mere claims of sexual abuse are equated with evidence, and when persons never convicted of the sexual abuse of a child are permanently stigmatized in our society, then it is obvious that something is seriously wrong with the mentality and conscience of many people; then it is obvious that they have lost their sense of decency, their understanding of justice, their desire to know and to guard the truth, and their respect for truthfulness and honor.

Robert Becker

December 6, 1993

Re: Vol2, No.10, FMSF Newsletter, page 4, "Institutionalized Accusations."

Do you have legal counsel? We think you owe your readers an apology, and you need to retract what you have published about our organization. The information you have published about S.O.U.P.! is false and libelous.

The quarterly list of perpetrators we publish is made up of names that are of public record. We list the names of the accused *allowed* defense. We verify. We have enclosed a sample copy for you. Check with the courts. You will discover that the perpetrators we name have not been denied defense.

The FMSF knows nothing of our group's "processes" utilized while compiling our lists so far. You need to retract your false statements about S.O.U.P.! and "by some people and institutions who claim to support survivors."

The retractions will be in the next issue of the FMS Foundation Newsletter.

Sincerely,  
S.O.U.P.!

The above letter was anonymous. There was no return address. It was postmarked Sacramento. Following is our response:

*We commented in our November newsletter on the activities of S.O.U.P.! (Survivors Opposed Ubiquitous Perps!). That organization has now written us demanding retraction of statements it regards as "libelous." Under the heading "Institutional Accusation: No Defense Allowed" we had said that for \$10.00 S.O.U.P.! offered to print the*

*name of an accused molester in its newsletter, which it would circulate to neighbors, schools and employers. S.O.U.P.! (in an unsigned letter) now advises it checks public records to be sure the named "perpetrator" has in fact been accused of, charged with, indicted for, convicted of, sentenced for, or pleaded guilty to, as the case may be, sexual abuse of children or adults. Presumably persons who have been convicted or sentenced, or who have pled guilty to crime have been afforded "a defense" in the relevant tribunal. This would not be so, however, where there merely is an accusation, charge or indictment. S.O.U.P.! published what it call the "National Registry of Known Perpetrators." It is not the purpose of FMSF to defend perpetrators or "known perpetrators," but rather to bring out the truth of the dangers of false memory and the harm done when it is the basis for untrue charges of child abuse.*

Two retractors wrote to tell us that someone sent them a S.O.U.P.! newsletter. They wondered about the following statement in the newsletter, "It won't be long before everyone you have contact with will know you are a child molester/rapist." The retractors said they didn't understand why anyone would send the S.O.U.P.! newsletter to them.

We are writing to give you hope. Our 36 year old daughter refused to be with people who would not believe that she had been sexually abused as a baby. Her alienation had developed over six years with the course of her therapy. Now a big change has taken place. We think it happened because of her boyfriend who had confided his belief in our innocence to us. She has made a turnaround. She is attentive, affectionate and acts as if nothing has happened. Has she retracted? I don't know because we haven't discussed it. We are just accepting her return from the hostile depressed pit she had fallen into - or really was shoved into by her bungling therapist. \$50,000 of our money went to this therapist that she has now left. Perhaps "reconciliation" is more accurate than retraction.

A Mom

To Whom It May Concern,

I recently saw your organization referenced in a "Dear Abby" column in a local newspaper. I am very interested in any information you may have or support options that may be available for my family. My parents and I have been victimized for the past several years by my only sibling (an older sister) who at age forty-five "suddenly remembered with the help of the only therapist who ever truly understood her" years of childhood abuse by my father. It has been a long and difficult process that has very nearly destroyed my parents.

I was raised in the same home, have encountered this therapist, have observed my sister's behavior deteriorate and am convinced that FMS is a very real possibility in our case. It is my opinion that my parents and I are reasonable people who have offered my sister all that we could but have come to feel that we are the ones abused....

A Sister

## Desperately Seeking Satan

by Barbara Grizzuti Harrison

from *Mirabella* magazine, December 1993

Copyright (c) 1993 by Barbara Grizzuti Harrison.

Reprinted by permission of Georges Borchardt, Inc. for author.

According to the National Committee to Prevent Child Abuse, almost three million cases of child abuse and neglect were reported in 1992; an estimated twelve hundred children--burned, scalded, bitten, strangled, beaten--died. These things are real. And they are evil. Not sufficiently evil, however (at least to talk-show hosts), to engender sustained and outraged interest . . . unless they are sensationally embellished.

On TV, in the media, our attention is directed not to the everyday violence, the ordinary and terrible reality of domestic child abuse, but to bizarre tales of satanic-ritual child abuse. We are immersed in the phenomenon of "recovery memory"--that phenomenon allowing a woman in her mid-thirties to resurrect memories of sexual molestation that occurred when she was as young as six months old. We are addressed by people who claim to be suffering from multiple-personality disorders, said, by those nominally afflicted, to have arisen from their hapless involvement in an international satanic conspiracy and their long-buried memories of parental abuse. Tabloids screech of whole day-care centers being corrupted by an insatiable (and wildly inventive) degenerate.

From time to time, children are made spectacles by such purveyors of fake compassion as Maury Povich, who had no compunction about asking a seventeen year old claiming to have been sexually abused from the ages of two to five at the McMartin Preschool in California: "Do you remember *specifically* what happened?" (The principles in the McMartin trial were not convicted after being tried by a hung jury.)

Povich also asked the teenager what effect the trial had had on him: "I got to come to New York and do a whole bunch of TV shows," the beleaguered boy said, giving rise, inescapably, to the question of what, in this mirrored hall of grotesquerie, is cause and what is effect. Do TV talk shows govern popular culture and foster perceptions of evil? Do people purchase their fifteen minutes of fame at the cost of ever more spectacular allegations?

**Are you sure you weren't ritually abused as a child? We have ways of making you remember . . .**

I remember how, in junior high school, we all envied a kid who broke her arm and wore it in a sling--such delicious attention she got; we envied, as children will, her singularity. Will children now envy those children who secure attention by publicly denouncing family members? And why in the world do parents allow their little children to be salaciously questioned by treacly, arrogant talk-show hosts:

*How many animals did you torture? How many did you kill? Did you eat them? Tell me about the time you helped to kill another child.*

What is going on here? A hell of a lot.

Fewer than half of the cases of child abuse or neglect reported in 1992 were actually opened for investigation. We are distracted from the banality and reality of everyday evil by the focus on the McMartin case and that of Margaret Kelly Michaels, who was convicted of 115 counts of molestation against nineteen children at the Wee Care center in New Jersey, including forcing them to lick peanut butter from her genitals and stick toys and utensils into their sexual orifices. (Michaels was sentenced to forty-seven years in prison; her conviction was overturned by an appellate court--she will be retried.) How was it possible for nobody, no adult body, to have seen, heard, smelled or suspected such abuse in an open setting? Exceedingly bizarre cases of recovered memory and satanic-ritual abuse claim our attention; the devastating abuse that goes on in the home under cover of cozy domesticity is insufficiently addressed.

When, at the persistent prompting of social workers or psychotherapists, children--or adults--suddenly remember exotic buried memories, it's wise to remember the truth of one's own life: we don't forget the most terrible things that happen to us; we remember them vividly and live with the consciousness of them. In an article written last year for an academic journal, Dr. Paul McHugh, director of the department of psychiatry and behavioral sciences at Johns Hopkins University School of Medicine, points out that severe traumas are "amplified in consciousness, remaining like grief to be reborn and reemphasized."

Children are suggestible; children fantasize. To forget this is to deny the presumption of innocence to anyone accused of heinous crimes against children.

Memories can be implanted in the minds of children by hectoring, bullying interviewers. Children, who like to please, are rewarded when they tell a zealot what she or he demands to hear; the questions become the answers: an echo chamber. According to Maggie Bruck, Ph.D., a psychologist at McGill University, "Many people who specialize in [sexual-abuse] cases have a preconceived notion of what happened, and in the course of questioning suggest it to the child, who then reports it as though it were true." The results of scientific studies with children under the age of six conducted by Stephen J. Ceci, Ph.D., a psychologist at Cornell, and summarized in an article in *The New York Times*, revealed the case of a four-year-old boy who was asked whether he had ever been to the hospital. He replied, truthfully, that he had not. But the following week he answered that he had, and that he'd cried. Gradually, in response to the same question every week, he elaborated, fancifully but not incredibly. By the eleventh week, he presented his interviewer with a detailed account of an injury (finger caught in a mousetrap) and a trip to the hospital. Was the child lying? Objectively, yes. But his motivation was to suit his answers to the question, in order to endear himself to an adult . . . or maybe the little fellow just got bored and said to himself: Anything to shut that guy up.

Straining credulity even more than McMartin-type cases are people who lay claim to having suffered satanic-ritual child abuse by a network of conspirators, including both Nazi scientists and Jews as well as the CIA. (The people who tell these stories *look* normal--but then so did all those guys, the staple of previous years' talk shows, who were taken for jaunts in UFO's by pea-green aliens.) The

FBI has found no evidence that a national or international conspiracy of mind-controlling Satanists responsible for molestation and murder exists; of course, for those determined to believe, the obvious and infuriating answer is, "Well, the FBI is part of it." "Word circulated in police workshops that Satanic cults were sacrificing between fifty and sixty thousand people every year in the U.S., *although the annual national total of homicides averages less than 25,000.*" (Italics mine.) This information comes to us from Lawrence Wright's brilliantly reported "Remembering Satan" in *The New Yorker* in May 1993. What gives Wright's story its horrific edge is the recognition that not only can anybody be accused but that one can become complicit in one's own victimization.

When Paul R. Ingram, to all appearances a model citizen and deputy sheriff in a small Washington town, was accused of abuse by two of his adult daughters, he said, "I can't see myself doing this"--a rather wispy denial, followed immediately by, "There may be a dark side of me that I don't know about." He was willing--almost eager--to accept guilt because, he said, he had a "hard time" hugging his kids "or even telling them that I love them, and . . . I just know that that's not natural." (The poor man learned his kiss-and-communicate pop-culture lessons well.) Ingram apparently believed that if he confessed, his memories would come back, along with contrition and forgiveness. A Pentacostal fundamentalist (the sanctuary of his church, Wright tells us, "has the ambience of the set of a daytime television talk show"), Ingram declared, in spite of the fact that his daughters' stories were incoherent and inconsistent, that "my girls know me. They wouldn't lie about something like this." When he was asked to account for his "failure" of memory, he replied--as a model talk-show guest might--that he had probably been abused himself as a child. His daughters' stories escalated: they uncovered memories of their brothers--and their mother--being abused. And escalated: they were victims, they said, of a conspiracy of sex criminals who met for weekly poker games at the Ingram family home. There were orgies of self-disclosure and self-revelation, as if everyone needed to be found guilty. At one point, Ingram said he was probably guilty of "emotional abuse," lack of communication and all that stuff talk shows routinely accuse us of. Ingram viewed his own parallel life, that life which up to now he had had no memory of, as if it were a horror movie; he entered a guilty plea to six counts of rape. (Ingram has since tried to withdraw his guilty plea, but the Washington State Supreme Court upheld his conviction; he is now serving a twenty-year sentence with no chance of parole until 2001.)

Ingram was subjected to a kind of torture: during the long hours of his interrogation, he claims he was inculcated with the assurance that innocence--denial of guilt--was proof of guilt.

Why would anyone so eagerly confess to unspeakable crimes? Ingram's (recanted) insistence on his "dark side" offers a clue: fundamentalist religions predispose people to a belief in duality--they break the world in two, absolute good and absolute evil. It is difficult for a fundamentalist to countenance the notion that good and evil are often braided, that good comes from bad and bad from good.

The religious far right has joined forces--wonder of

wonders?--with *Ms.* magazine in espousing a militant belief in the conspiracy of satanic abusers. "Cult ritual abuse is the logical extreme of the oppression we live with everyday," says one *Ms.* correspondent; another says, "Cults are the distilled versions of men bonding around distorted ritual, creating a false world for hapless women and children." This alliance is not so odd as it appears on the surface: there is a coarse ideology tainting rational feminism that sees the world, just as religious fundamentalists do, in terms of good/evil; men/women; oppressor/oppressed, an ideology that espouses one *fundamental* (and tidy) source of evil.

We know who loses from emphasis on the bizarre: children who suffer genuine domestic abuse. Do we know who profits?

A network of therapists--many of whom use "narcocanalysis," hypnosis and drugs, to free "repressed" memories--profits. Moral crusaders, whose temperaments thrive on wild injustices--the ordinary pain of ordinary human life being apparently insufficient to their needs--profit. And, as Jeffrey S. Victor, Ph.D., points out in his book, *Satanic Panic*, lecturers and people who sell training videos about repressed memories profit.

Without the societally sanctioned notion of "recovered memory," allegations would not be brought against parents for abuse reputedly perpetrated decades ago.

But what is memory? How does it work? (People with "recovered memories" have been known to speak of "memory" and of something else called "conscious memory"; there is no scientific--or for that matter poetic--proof that such categories exist.) What writer Alain Robbe-Grillet said in *The Paris Review* about the creative process applies to "recovered memory": "Memory belongs to the imagination. Human memory is not like a computer which records things; it is part of the imaginative process, on the same terms as invention." Our stories--which are always, in fact, stories *about* stories--serve our present world view, our ephemeral moods or cultural imperatives. As Robyn M. Dawes, professor of psychology at Carnegie Mellon, wrote, "We quite literally 'make up stories' about our lives, the world, and reality in general. Often it is the story that creates the memory, rather than vice versa." We are all unwitting liars; it is a way to make sense and order of our histories.

Memory reconstructs, deconstructs. It does not exist in lucid, unpolluted form. Memory is imagination; a troubled person is well able to construct memories around desire . . . around pain. And with a not-disinterested therapist to lead that person . . . BANG! a shattering memory is born.

Suspicion, in the world of recovered memory, always leads to confirmation. In *The Sexual Healing Journey* (the bible of recovered-rememberers), Wendy Maltz writes: "Memory loss can be an important way of coping with abuse . . . Victims of extremely violent and bizarre abuse may suffer traumatic amnesia . . . Memory loss protects us from overwhelming or continuous psychological strain . . . When memories of events and feelings do start to surface," she says, "trust them," although "they may not make sense initially." Then ask yourself: "Who would have been the likely perpetrators?"

This is how voodoo works; this is how inquisitions work. This is how disregard for objective truth works.



According to one school of thought, whether "recovered memories" are true or not is beside the therapeutic point. Whether or not the abuse actually occurred, clinicians must treat the pain of the alleged victim.

I was for a longtime inclined to this point of view myself; I thought, Well, if someone is in so much pain that she needs to construct false memories, the memories are probably symbolic of emotional abuse . . . and it's the pain that has to be treated. That's true, as far as it goes--*as long as it doesn't go into the courtroom*. What is left out of the equation is the rapacity or ineptitude of therapists (and talk-show hosts and other interested parties) who encourage and root for "recovered memories." More importantly, the formulation that the pain, not the truth, matters leaves out the family members who are wrongly accused, with such devastating consequences as one can hardly imagine.

We need to protect children from real abuse. We need to protect families (who are often confronted with allegations of abuse when child custody is at stake or when there is a family feud or vendetta).

But how?

Experts who were shown videotapes of children recounting both true and false memories were correct about the accuracy of a child's account "about one-third of the time," Ceci says. This is appalling; how--short of definitive medical evidence--do we go about sorting truth from error?

Tragically, there is no ready answer. There are only questions and conjectures.

Women account for 90 percent of the "repressed memories" reported to the False Memory Syndrome Foundation in Philadelphia. Why?

Given the eagerness of people like Ingram to confess to even more charges than are brought against them, should we ask ourselves for what sins--communal and/or individual--we are in fact atoning? If charges of molestation may be "symbolic," so may confessions to sexual abuse be symbolic.

It is possible that, in this age of AIDS, false charges of sexual abuse reflect a virulent strain of anti-eroticism?

Our culture has largely divorced sex from love; it has also denied the transcendence of love. What do I want? What will I get out of it? people ask themselves of relationships, making lists, as if they were going to a supermarket. The very use of the word "relationship," as opposed to love, is a form of reductionism and utilitarianism. Does the denial of the transcendence of love create a climate in which false charges gain acceptance?

We have problems with the word "evil," which has suffered underuse in our time; conspiratorial notions of satanic abuse may be replacing a valid but complicated theological concept. We are, according to all indices, a religious people, but legally and for public consumption, we are determinedly secular. Are we suffering a kind of dislocation as a result, and is this dislocation finding its voice in charges of satanic abuse? Where, after all, do you go when the seven deadly sins are no longer sensational enough to provide entertainment fodder?

Every so often--think of Salem, think of the 1950s--America seems to need a purge, a catharsis, a form of inquisition; it is interesting, for example, that the "network" of Satanists has been compared to communist "cells." I wish

someone smarter than I would tell me why we need to convulse in this manner; I think we are going through another such period now . . . attendant, perhaps, on culture shock, unassimilated social change?

I return to talk shows, which are a loony mixture of voyeurism, exhibitionism, confessional, political forum, bastardized news, bread-and-circus entertainment, syrup and malice, anger and angst. They are apparently the vehicle of debate; in fact, on every single talk show, layers of complex experience are made to yield only one socially and politically correct explanation and solution, such as, *Victims must be believed*. I used to think that premise was a good one. Now I think not. We have forgotten that people lie. At the same time, I'd be loathe to relinquish the presumption of innocence; how do we respect victims and maintain that presumption at the same time?

I've spent hours and hours reading about child abuse, recovered memories and satanic ritual abuse, and it is clear to me that, except for fanatics, rigid ideologues and profiteers of the soul, everyone who applies her intelligence to this vexed subject suffers a sense of futility and frustration. Few are so immodest as to claim to have the answers. Where do we find the truth? I wish I knew. It is only the truth that sets us free.

Analogizing recovered memories of years of sex abuse to World War I veterans who many years later recover scenes of combat mixes apples and oranges. Veterans not recalling every bloody battle scene are not the same as their repressing the entire experience of having been in the war. They knew they were veterans.

Richard Green MD, JD  
Professor of Psychiatry at UCLA and an attorney.  
LA Times, Dec 4, 1993, Editorial Page

### Additions to Bibliography

\_\_\_ 095 "Oedipal Wrecks," by E. Fuller Torrey. *The Washington Monthly*, January/February 1992 [\$3.00]

\_\_\_ 173 "False memory group looks into abuse that never happened," by John Lyons. *Winnipeg Free Press*, December 7, 1992. [\$1.00]

\_\_\_ 291 "I Forgot to Remember to Forget," by Wes Eichenwald. *The Boston Phoenix*, October 15, 1993. [\$2.00]

\_\_\_ 295 "Trial by Accusation," Review & Outlook commentary. *The Wall Street Journal*, December 1, 1993. [\$1.00]

\_\_\_ 592 Wakefield, H. & Underwager, R. (1993) "A Paradigm Shift for Expert Witnesses," *Issues in Child Abuse Accusations*. Summer 1993, 3: 156-167.

\_\_\_ FMSF Newsletters, Vol 2, 1993 [\$15.00]

**FMSF MEETINGS**

*FAMILIES & PROFESSIONALS  
WORKING TOGETHER*

**FUTURE MEETINGS****NATIONAL FMSF PROGRAM**

**Memory and Reality  
June 3-5, 1994  
Kansas City**

Continuing Education Credit Approved

Speakers will include members of the FMSF Advisory Board. Sessions will be held Friday through Sunday noon to be followed with a public lecture Sunday afternoon.

**MIDWEST REGIONAL MEETING**

**May 21-22, 1994  
Michigan State University  
LANSING, MI**

**APA**

**American Psychiatric Association  
ANNUAL MEETING  
Doubletree Hotel  
PHILADELPHIA, PA  
Wednesday, May 25, 1994  
2-5:00 pm Seminar Speakers:  
Drs. Green, Lief,  
McHugh, Singer**

**UNITED STATES**

Call the contact person listed for time and location of meeting.

**key: (MO) = monthly**

**CALIFORNIA****CENTRAL COAST**

Carole (805) 967-8058

**NORTH COUNTY ESCONDIDO**

Joe & Marlene (619) 745-5518

**RANCHO CUCAMONGA GROUP**

Marilyn (909) 985-7890  
1st Monday, (MO) - 7:30 pm

**SAN JOSE-SAN FRANCISCO BAY AREA**

Jack & Pat (408) 425-1430  
Last Saturday, Bi-Monthly,

**VALENCIA, CA**

Jane & Mark (805) 947-4376  
4th Saturday (MO) 10:00 am

**COLORADO****DENVER**

Roy (303) 221-4816  
4th Saturday, (MO) 1:00 pm

**FLORIDA****BOCA RATON,**

Esther (407) 364-8290  
Every Thursday, 1:30 pm

**KANSAS****KANSAS CITY**

Pat (913) 238-2447 or  
Jan (816) 276-8964  
2nd Sunday (MO)

**KENTUCKY****LEXINGTON**

Dixie (606) 356-9309

**MARYLAND****ANNAPOLIS AREA**

Carol (410) 647-6339  
Sun., February 6, 3:00 pm

**MICHIGAN****GRAND RAPIDS AREA - JENISON**

Catharine (606) 363-1354  
2nd Monday (MO)

Michigan Information Newsletter

P O Box 15044, Ann Arbor, MI 48106  
(313) 461-6213

Meeting notices & state topics

**MINNESOTA**

Terry & Collette  
(507) 642-3630

**OHIO****CINCINNATI AREA**

Bob (502) 957-2378

**MISSOURI (See KANSAS)****NEW ENGLAND****CHELMSFORD, MASSACHUSETTS**

Jean  
2nd Sunday (MO) 1:00 pm

**NEW JERSEY (South) -**

(See PENNSYLVANIA)

**PENNSYLVANIA****WAYNE, PA**

Jim & Joanne (215) 783-0396

**TEXAS (CENTRAL)**

Nancy & Jim (512) 478-8395

**WISCONSIN**

Katie & Leo (414) 476-0285  
To participate in a phone tree.

**CANADA****BRITISH COLUMBIA****VANCOUVER & MAINLAND**

Ruth (604) 925-1539

**VICTORIA & VANCOUVER ISLAND**

John (604) 721-3219  
3rd Tuesday (MO) 7:30 pm

**MANITOBA****WINNIPEG**

Joan (204) 257-9444  
1st Sunday (MO)

**ONTARIO****TORONTO**

Pat (416) 445-1995

**AUSTRALIA**

Kenneth

08-296-6695

**NEW ZEALAND**

Dr. Goodyear-Smith

tel 0-9-415-8095

fax 0-9-415-8471

**UNITED KINGDOM**

**Affiliated Group**

**Adult Children Accusing Parents**  
Roger Scotford (0) 225-868682

**To list a meeting:**

Mail or fax information to Nancy 2 months in advance of meeting date, i.e., for April newsletter, send by Feb. 25th. Standing meetings will continue to be listed unless notified otherwise by contact person.

Do you have access to e-mail? Send a message to  
pjf@cis.upenn.edu

if you want to receive notices of radio and television broadcasts about FMS. All the message need say is "add to the FMS list". It would be useful, but not necessary, if you add your full name (all addresses and names will remain strictly confidential). The list is not a "bulletin board". Its only use is to send occasional notices of broadcasts.

#### AUDIO TAPES AVAILABLE

##### FROM ONE DAUGHTER TO ANOTHER

Audio tape formed from the life experience of retractor, Janet Puhr. The approach is designed to lead a daughter down a situational path of reality in the hope that this will bring the daughter back into the light on heart-to-heart journey back home to love and good times. 50 min. Cost \$30 (includes shipping. For 2-say express add \$3.) Make checks payable to: Janet Puhr, P.O. Box 293, Chicago Ridge, IL 60415. Enclose name, address and phone number. (Editor's apology for listing this as a video-tape. It is an audio tape. Ms. Puhr informed us that replacement tapes will be sent to those whose tapes contained noise interference.)

#### VIDEO TAPES AVAILABLE

##### ADULTS BELATED ACCUSATIONS OF CHILD SEXUAL ABUSE

by Richard A. Gardner, M.D.

Seventy-five minute recording of a presentation to the FMSF in New York City on Sept. 19, 1993. Describes Dr. Gardner's views of the factors which have brought about the sex-abuse hysteria which we have been witnessing in the US since the early 1980's. Valuable to therapists, lawyers and those in a position to help families. To order, 800-544-6162. In NJ call 201-567-7295 or FAX 201-567-8956. Cost \$15 (NJ residents add 6% sales tax--\$.90/tape) plus \$2 postage & handling or write to Creative Therapeutics, Inc., P O BOX 522, Cresskill, NJ 07626-0317.

#### Criminal Lawyers' Association Conference

##### *The Abuse and Misuse of Science:*

##### *Recovered Memories*

November 5-7, 1993 Toronto

Contact Alan D. Gold, Barrister, 20 Adelaide Street East, Suite 210, Toronto, On M5C 2T6, 416-368-1726, fax: 416-368-6811

The FMSF Newsletter is published 10 times a year by the False Memory Syndrome Foundation. A subscription is included in membership fees. Others may subscribe by sending a check or money order, payable to FMS Foundation, to the address below. 1994 subscription rates: USA: 1 year \$20, Student \$10; Canada: 1 year \$25; (in U.S. dollars); Foreign: 1 year \$35. Single issue price: \$3

FMS Foundation  
3401 Market Street, Suite 130  
Philadelphia, PA 19104-3315  
Phone 215-387-1865  
ISSN # 1069-0484

Pamela Freyd, Ph.D., Executive Director

FMSF Scientific and Professional Advisory Board

January 17, 1993

Terence W. Campbell, Ph.D., Clinical and Forensic Psychology, Sterling Heights, MI; Rosalind Cartwright, Rush Presbyterian St. Lukes Medical Center, Chicago, IL; Jean Chapman, Ph.D., University of Wisconsin, Madison, WI; Loren Chapman, Ph.D., University of Wisconsin, Madison, WI; Robyn M. Dawes, Ph.D., Carnegie Mellon University, Pittsburgh, PA; David F. Dinges, Ph.D., University of Pennsylvania, The Institute of Pennsylvania Hospital, Philadelphia, PA; Fred Frankel, M.B.Ch.B., D.P.M., Beth Israel Hospital, Harvard Medical School, Boston, MA; George K. Ganaway, M.D., Emory University of Medicine, Atlanta, GA; Martin Gardner, Author, Hendersonville, NC; Rachel Gelman, Ph.D., University of California, Los Angeles, CA; Henry Gleitman, Ph.D., University of Pennsylvania, Philadelphia, PA; Lila Gleitman, Ph.D., University of Pennsylvania, Philadelphia, PA; Richard Green, M.D., J.D., UCLA School of Medicine, Los Angeles, CA; David A. Halperin, M.D., Mount Sinai School of Medicine, New York, NY; Ernest Hilgard, Ph.D., Stanford University, Palo Alto, CA; John Hochman, M.D., UCLA Medical School, Los Angeles, CA; David S. Holmes, Ph.D., University of Kansas, Lawrence, KS; Philip S. Holzman, Ph.D., Harvard University, Cambridge, MA; John Kihlstrom, Ph.D., University of Arizona, Tucson, AZ; Harold Lief, M.D., University of Pennsylvania, Philadelphia, PA; Elizabeth Loftus, Ph.D., University of Washington, Seattle, WA; Paul McHugh, M.D., Johns Hopkins University, Baltimore, MD; Harold Merckey, D.M., University of Western Ontario, London, Canada; Ulric Neisser, Ph.D., Emory University, Atlanta, GA; Richard Ofshe, Ph.D., University of California, Berkeley, CA; Martin Orne, M.D., Ph.D., University of Pennsylvania, The Institute of Pennsylvania Hospital, Philadelphia, PA; Loren Pankratz, Ph.D., Oregon Health Sciences University, Portland, OR; Campbell Perry, Ph.D., Concordia University, Montreal, Canada; Michael A. Persinger, Ph.D., Laurentian University, Ontario, Canada; August T. Piper, Jr., M.D., Seattle, WA; Harrison Pope, Jr., M.D., Harvard Medical School, Cambridge, MA; James Randi, Author and Magician, Plantation, FL; Carolyn Saari, Ph.D., Loyola University, Chicago, IL; Theodore Sarbin, Ph.D., University of California, Santa Cruz, CA; Thomas A. Sebeok, Ph.D., Indiana University, Bloomington, IN; Louise Shoemaker, Ph.D., University of Pennsylvania, Philadelphia, PA; Margaret Singer, Ph.D., University of California, Berkeley, CA; Ralph Slovenko, J.D., Ph.D., Wayne State University Law School, Detroit, MI; Donald Spence, Ph.D., Robert Wood Johnson Medical Center, Princeton, NJ; Jeffrey Victor, Ph.D., Jamestown Community College, Jamestown, NY; Hollida Wakefield, M.A., Institute of Psychological Therapies, Northfield, MN; Louis Jolyon West, M.D., UCLA School of Medicine, Los Angeles, CA.

# **FMS Foundation**

3401 Market Street - suite 130  
Philadelphia, PA 19104-3315

NON-PROFIT ORG.  
U. S. POSTAGE  
PAID  
PHILA., PA  
PERMIT NO. 1408

**Dated Material**